

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

Karel Hero MULDER

Serial No. 10/734,274

GROUP Unassigned

Filed December 15, 2003

Examiner Unknown

UROLOGICAL INSTRUMENT FOR
ASSESSING A URINE FLOW

INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In compliance with Rules 1.97 and 1.98, and in fulfillment of the duty of disclosure under Rule 1.56, the accompanying documents, copies of which are attached to this statement, are made of record on the enclosed sheet.

A concise explanation of the relevance of these items is that these references were cited in the corresponding International application NL 1022161 filed December 13, 2002. A copy of that search report is attached hereto.

Respectfully submitted,

YOUNG & THOMPSON

By



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March 8, 2004



FORM PTO-1449 U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

ATTY. DOCKET NO.
2005-1021

SERIAL NO.
10/734,274

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**
(Use several sheets if necessary)

37 CFR 1.98(b)

APPLICANT
Karel Hero MULDER

FILING DATED
December 15, 2003

GROUP
Unassigned

U.S. PATENT DOCUMENTS

| EXAMINER INITIAL | PATENT NUMBER | ISSUE DATE | PATENTEE | CLASS | SUB CLASS | FILING DATE IF APPROPRIATE |
|---------------------|---------------|---------------|----------|-------|--------------|-------------------------------|
| AA | 3,871,231 | 3/75 | Ciarico | | | |
| AB | 4,865,046 | 9/89 | Duran | | | |
| AC | | | | | | |
| AD | | | | | | |

FOREIGN PATENT OR PUBLISHED FOREIGN PATENT APPLICATION

| | DOCUMENT NO. | PUBL. DATE | COUNTRY OR PATENT OFFICE | CLASS | SUB CLASS | TRANSLATION YES NO |
|----|--------------|---------------|--------------------------|-------|--------------|-----------------------|
| AI | | | | | | |
| AJ | | | | | | |
| AK | | | | | | |
| AL | | | | | | |
| AM | | | | | | |
| AN | | | | | | |
| AO | | | | | | |
| AP | | | | | | |
| AQ | | | | | | |

OTHER DOCUMENTS (Including Author, Title, Date, Relevant Pages, Place of Publication)

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|----|--|
| AT | |
| AU | |
| AV | |
| AX | |
| AY | |

EXAMINER

DATE CONSIDERED

EXAMINER: Initial citation considered. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.